

looked at the Chicago Tribune and you read an article that said your property taxes are going to go up 20 percent. If you turned on the radio, you probably heard folks talking in Chicagoland about unemployment at 10.5 percent in Illinois, a number that we have not seen since the early 1980s. If you have been listening to the debate in Washington, D.C., in the past couple of weeks, you have been hearing about this crushing debt that is coming on you, your children, and your grandchildren.

I went this afternoon to the Bureau of the Public Debt in downtown Washington and watched within a twinkling of an eye \$44 billion that was borrowed on a 2-year note. That type of attitude and the attitude of spending and spending and spending is becoming weary for the folks that I represent in the Sixth District of Illinois.

It's time for this Congress to discipline itself and come up with a health care plan that meets people's needs but doesn't break the bank.

HEALTH CARE

(Mr. CULBERSON asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. CULBERSON. Mr. Speaker, the people in Texas that I represent oppose the Pelosi-Obama government takeover health care bill by a margin of 77 percent because we understand in Texas that our health care system needs a tune-up, not a trade-in. We need to focus, as the conservative minority has, on reducing the cost of health insurance and making it affordable and portable.

We, in the conservative minority, the temporary minority, have authored legislation that will make insurance portable across State lines, that will bring down the cost of health insurance by enacting tort reforms nationwide to protect doctors from frivolous litigation as we did in Texas. In Texas, we adopted tort reform, and the cost of health insurance dropped for all Texans, and about 400,000 additional Texans got health insurance who could not before.

We need to make sure that the greatest health care system ever created in the history of the world is protected, that we protect the doctor-patient relationship. Let's focus on reducing the cost of health insurance, making it affordable and portable.

Give our health care system a tune-up, not a trade-in.

GOVERNMENTAL TAKEOVER OF HEALTH CARE AND THE DETRIMENTAL EFFECT IT WILL HAVE ON OUR SENIORS

(Mr. BROWN of South Carolina asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. BROWN of South Carolina. Mr. Speaker, I rise today to highlight the

Democrats' plan to pay for their government takeover of health care by cutting nearly \$162 billion of Medicare at the expense of our seniors.

Across the Nation, nearly 11 million seniors chose Medicare Advantage plans as their preferred coverage. Of those 11 million, over 11,000 seniors in the First District of South Carolina, an area with many retirees, may have their coverage dropped or benefits cut if the Democrats have it their way.

Despite the President's promise that if you like your current plan you can keep it, it is clear that some seniors will eventually be forced into a government-run plan. Additionally, the CBO has said that the Democrats' plan will increase seniors' Medicare prescription drug costs by 20 percent over the next decade.

As Medicare dangerously approaches bankruptcy, Democrats must open the process up to Republicans to work to repair this rapidly failing program and protect our seniors from rising drug costs, limited coverage, and reduced quality of care. Republicans vow to honor our seniors by blocking Washington's bureaucrats from overregulating their health care and by providing options and the best quality coverage for all Americans.

HEALTH CARE

(Mr. OLSON asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. OLSON. Mr. Speaker, my colleagues in the majority have repeatedly promised that under their public option plan, individuals can keep the coverage they currently have and nothing will change except they will have more choices at a lower cost.

As I speak with employers and small businesses in my district, the truth is vastly different. Several employers in the district I represent have candidly stated that dropping private insurance for employees, instead of paying a mandatory 8 percent surtax, makes the most economic sense for their business. Employees will no longer have the choice to keep the coverage they currently have under this scenario.

Raising taxes, eliminating choices for Americans, and placing the government in charge of health care, that hardly strikes me as a choice. The hardworking Americans in the 22nd District of Texas and cities and towns across America were promised a choice.

I ask my colleagues on the other side of the aisle, where is the choice in this government-mandated care?

HEALTH CARE

(Mrs. LUMMIS asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Mrs. LUMMIS. Mr. Speaker, I would like to express what is my greatest

hope and my greatest concern in 1 minute.

My greatest concern is that, by using Medicare as a means to fund this new program, you will be taking more money away from rural areas that are already inadequately reimbursed by Medicare for their costs. For example, in Casper, Wyoming, the hospital is only reimbursed at 32 cents on the dollar for Medicare actual costs.

We are underreimbursing now and having to subsidize Medicare. The government is not meeting its obligation to Medicare. My greatest hope is that Democrats will read the 40-plus Republican bills to reform health care and choose the best among them and bring those to the floor so we can discuss them and debate them.

We have over 40 bills that you can use for great ideas to reform health care in a way that will make it available to all Americans.

HEALTH CARE

(Mr. ROHRABACHER asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ROHRABACHER. Mr. Speaker, there are 20 million uninsured Americans who just can't afford insurance, others who have lost insurance when they lost their jobs. Still others have a preexisting insurance condition and have been frozen out of the insurance market. Then there are frivolous lawsuits which drain very limited health care dollars. Of course, we find that our best insurance providers can't sell their insurance across the country. They are frozen out. There is no competition.

These are problems that Republicans are anxious to work with Democrats on. I plead with my Democratic colleagues, don't hold health care reform hostage, dependent on the enactment of some socialistic experiment with government-run health care.

What's going to happen? What's being demanded here is a transformation of our system rather than a reform of our system. That transformation of our system will hurt seniors. It will take people who now have insurance in small business and put them out of a job as well as with no insurance. Of course, it will not improve the situation but will be very costly for the American people.

SENIOR CITIZENS' MEDICARE COVERAGE

(Mr. FRANKS of Arizona asked and was given permission to address the House for 1 minute.)

Mr. FRANKS of Arizona. Mr. Speaker, it is so ironic that this Congress is debating the means of covering the uninsured while Democrats are planning to cut the existing coverage of those who need it most—our senior citizens.

Nearly 70,000 of those senior citizens will be affected and live in my district,

Mr. Speaker. Those senior citizens will experience drastic changes to their Medicare coverage as a result of the \$500 million Medicare Advantage cut imposed by the Democrats' bill, H.R. 3200.

Democrats may silence all of our Republican bills, but they are wrong if they believe Republicans will keep silent and allow senior citizens in America, who have already spent the majority of their lives contributing to this Nation, to be forced to give up the health care coverage they so vitally need in order to pay for a socialist, government takeover of health care which has failed in every State and in every country that has been unwise enough to allow it to happen.

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HEALTH CARE

(Mr. SCALISE asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. SCALISE. Mr. Speaker, right now, while the Democrats who are running Congress are meeting behind closed doors to rewrite a government takeover of health care, the American people are asking why are they being left out?

Senior citizens know that they are being left out of this health care bill because they are looking at the \$400 billion in cuts to Medicare that President Obama and Speaker PELOSI's bill will impose upon them, including almost the elimination of Medicare Advantage, which is a program that over 100,000 in Louisiana want and like and will be denied under their bill.

Small businesses and families are wondering why they are being left out of these discussions when they look at over \$800 billion in new taxes that American families will have to pay, many of which make below \$70,000, which violates one of the President's pledges.

What the American people want is real health care reform, and that is why we have brought a number of bills, including H.R. 3400, which actually goes in and addresses the problems, like preexisting conditions, addressing those problems like lowering the cost so that people can have portability and buy across State lines, and actually passing real Medicare liability reform to lower the cost of health care.

Let's fix the problems that are broken, not break what is working.

HEALTH CARE

(Mr. LUETKEMEYER asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. LUETKEMEYER. Mr. Speaker, this morning I had the opportunity to meet with a group of Honor Flight veterans at the World War II veterans memorial. These ladies and gentlemen are

our heroes. One of them came up to me and said, Congressman, please don't let them take my Medicare away. That is a solemn promise.

They are concerned about the quality of care, about the costs they are going to incur. This is something that is extremely important to our seniors.

Over the weekend, I had an opportunity to talk to a businessman. He came up and said, Congressman, please don't let them implement these mandates and these excessive taxes on me. I can't survive as a business.

The American people are looking over these proposals and they are saying "no." A while ago we heard that it is not leadership unless you vote "yes." I say it is time we start listening to the people and doing what they want. They have looked at these issues, they have looked at these proposals, and they have said "no." I think we need to listen to them, because they are the ones who are going to pay the bills, they are the ones that are going to be impacted by it, and they say "no."

HEALTH CARE REFORM

(Mrs. CHRISTENSEN asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Mrs. CHRISTENSEN. Mr. Speaker, I am sick and tired of all of the lines in the sand on health care reform. This is something that we have to do, something we cannot afford not to do. To quote Fannie Lou Hamer, on behalf of African Americans and all who are uninsured, "We are sick and tired of being sick and tired."

This Congress has an obligation to end this, and those who continue to misrepresent the facts need to stop. The bills being put together will end insurance discrimination and the dropping of coverage when one needs it most. We will provide a public plan for those who choose to use it, and, if we do it right, we will reduce the high cost of insurance and will end those insurance horror stories.

With our bill, we will ensure security for our seniors, affordability for the middle class, access to quality health care for the poor and our responsibility to our children. We can do this without adding to the deficit.

So I think everyone needs to get up off of that hard line and come together around the most important thing we can do in our time here—give every American the possibility of health, wellness, and a decent quality of life.

HEALTH CARE

(Mr. WESTMORELAND asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. WESTMORELAND. Mr. Speaker, this majority has just run a \$1.4 trillion deficit for fiscal year 2009, even as we are told a new health care entitle-

ment will reduce red ink by \$871 billion over 10 years. But let's look at history and what has happened since the government has got involved in health care.

Prior to the creation of Medicare and Medicaid in 1965, health care inflation ran slightly faster than overall inflation. In the years since, medical inflation has climbed 2.5 percent faster than the cost increases elsewhere in the economy.

Let's start with Medicaid. House Ways and Means in 1965 estimated that the first 5 years' cost would be \$238 million. Instead, it hit more than \$1 billion, and costs have kept climbing since.

Let's look at this. In 1965, Medicare, another government program, was projected to cost \$12 billion by 1990. It cost \$110 billion. Medicare hospital, 1965 projected 1990 costs, \$9 billion; actual cost, \$67 billion.

Let's look at history and see what happens when the government gets involved.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Members should heed the gavel.

HEALTH CARE

(Mr. RYAN of Wisconsin asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. RYAN of Wisconsin. Mr. Speaker, Wisconsinites might want to know that just recently our Blue Cross Blue Shield program announced that people in their twenties under this health care bill will see a 199 percent increase in their health insurance premiums. People in their forties will see a 122 percent increase in their health insurance premiums. People in their fifties will see a dramatic double-digit increase in their health insurance premiums.

Mr. Speaker, 214,000 Wisconsinites might want to know that their Medicare Advantage plan that they enjoy will be either dramatically more expensive or will go away completely. The American taxpayer might want to know that government estimators are telling us that this bill will cost \$1 trillion to \$2 trillion in a new health care entitlement, which will surely add more deficit and debt to future generations.

The shame of all of this, Mr. Speaker, is that we could fix what is broken in health care without breaking what is working in health care. Republicans have offered 40 different pieces of legislation in an attempt to get bipartisan compromise, to make sure that the uninsured get insured, that people with preexisting conditions get health care, and we do this without breaking the bank, without raising taxes and without creating new debt and deficit and entitlements.